

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS   | ID NO.       | DATE           |
|---------------------|------------|--------------|----------------|
| FEE DETERMINATION   | <i>mm</i>  | <i>67814</i> | <i>9/28/99</i> |
| O.I.P.E. CLASSIFIER | <i>ann</i> | <i>59229</i> | <i>10-1-99</i> |
| FORMALITY REVIEW    | <i>aw</i>  | <i>59229</i> | <i>5/18/00</i> |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 1        | ✓    |
| 2        | ✓    |
| 3        | ✓    |
| 4        | ✓    |
| 5        | ✓    |
| 6        | ✓    |
| 7        | ✓    |
| 8        | ✓    |
| 9        | ✓    |
| 10       | ✓    |
| 11       | ✓    |
| 12       | ✓    |
| 13       | ✓    |
| 14       | ✓    |
| 15       | ✓    |
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| Claim    | Date |
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| Claim    | Date |
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BEST AVAILABLE COPY If more than 150 claims or 10 actions  
staple additional sheet here

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